

FULL LICENSE RENEWAL INSTRUCTIONS

Table of Contents

	<u>Page</u>
Due Date	3
Renewal Fee	3
Failure to Renew	3
Name Change	3
Pre-Printed Data	3

PART A

1) Activity Status	3
2) Address & Contact Information	4
3) Email Address	4
4) Fax Number	5
5) Practice Specialty	5
6) Board Certifications	5
7) Drug Registration Numbers	5
8) State Licenses, Current	5
9) State Licenses, Previous	5
10) Work Sites	5
11) Care of Patients in Massachusetts	5
12) Medical Liability Insurance Information	5
13) Office-Based Surgery	6
14) Claims Made	6
15) Claims Closed	6
16) Other Civil Lawsuits	6
17) Criminal Charges	6
18) Other Issues	7
19) Restriction of Controlled Substances Privileges	8
20) Medical License Application Withdrawal/Denial of Medical License	8
21) Medical Liability Insurance Actions	8
22) Continuing Professional Development (CPD) Requirements	8

PART B

23) Medical Condition	11
24) Use of Chemical Substances	11
25) Electronic Health Records Proficiency	12
26) Recognizing and Reporting Child Abuse or Neglect	12

PART C

Physician Profile	12
Certifications	12
1) Reporting Child Abuse	12
2) Reporting Disabled Persons Abuse	13
3) Reporting of Elder Abuse	13
4) Reporting Treatment of Wounds, Burns and Other Injuries	13
5) Reporting Treatment of Victims of Rape or Sexual Assault	13
6) Board Reporting Requirements	14
7) Medicare Balance Billing Statement	14
8) Massachusetts Tax Reporting and Payment	14
9) Reporting of Employees and Contractors	14
10) Withholding and Remitting Child Support	14
11) Patient Care Assessment	14
12) Disclosure of Ownership Interest In Physical Therapy Service	14
13) Health Insurance Portability and Accountability Act	14

14) Compliance with HIPAA	14
15) Criminal Record Check	15

REFERENCE TABLES

Table 1: Practice Specialty	16
Table 2: American Board of Medical Specialties (ABMS)	16
Table 3: American Osteopathic Association Specialties (AOA)	17
Table 4: Health Care Facilities.....	18
Table 5: Basis for Allegation	19

<u>RESOURCES AND WEBSITES</u>	21
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FULL LICENSE RENEWAL INSTRUCTIONS

Please follow the Renewal Instructions to assist you in completing your renewal application. Specific instructions are provided for each item on the renewal application and for any additional documentation required to complete the renewal process. Your renewal application is pre-printed with information that you previously reported. Please update and correct the information to ensure that it is current and accurate. If you need additional space for your answers or corrections, please attach additional sheets of paper. The Form R for Questions 14-21 and the PCA-O form for office-based surgery are enclosed with your renewal packet and also available at www.mass.gov/eohhs/gov/departments/borim/physicians/forms.html. The [Reference Tables](#) are included at the end of these instructions.

Providing false or inaccurate information on the Renewal Application, Parts A, B, C, Form R, PCA-O or any attachments could result in severe consequences, including revocation of your license or other disciplinary action, and/or criminal prosecution for perjury.

To avoid delay in renewing your license, please read the instructions carefully. You may visit the Board's website at www.mass.gov/massmedboard for additional information. The Board considers an application complete only if it meets the following requirements:

- a. it is PRINTED in a legible manner;
- b. all data, information, and signatures requested are provided as specified;
- c. the proper fee is submitted; and
- d. the applicant has submitted any additional material the Board has requested.

Your completed renewal application and fee should be mailed to the Board promptly, at least four (4) weeks before your birth date to ensure the timely renewal of your license.

Due Date: This is the date on which your renewal fee and completed application are due. Your due date is four (4) weeks prior to your birth date.

Renewal Fee: The renewal fee is \$600.00; it is non-refundable. Please make the check payable to the Commonwealth of Massachusetts. Certified checks, money orders, and personal checks are accepted. Mail your check and the detachable coupon in the enclosed BLUE envelope.

Failure to Renew: Unless you have successfully completed the renewal process, your license to practice medicine will expire on your birthday. If your license is not renewed, you may not practice medicine after 11:59 p.m. on your birthday.

Name Change: If you have changed your name, you must complete the Name Change Form, which is available on the Board's website at www.mass.gov/eohhs/gov/departments/borim/physicians/forms.html.

Pre-Printed Data: Data for Questions 1-12 has already been entered from information previously provided on your renewal application. Please make additions or corrections in the spaces provided or use an additional sheet of paper.

PART A

1) Activity Status: If you wish to change your activity status, please check the appropriate box. You also need to complete the appropriate form. If you check inactive, remember that when you sign the renewal form you certify that you will not practice medicine in Massachusetts.

An inactive licensee may not write prescriptions, even for his or her family members. An inactive licensee is exempt from continuing professional development (CPD) and mandatory malpractice liability insurance.

requirements (except for “tail” coverage) but is subject to all other provisions of the Board's regulations. An inactive licensee must pay the \$600.00 registration fee and continue to renew biennially.

The “practice of medicine” is defined in the Board's regulations at 243 CMR 2.01. In part, the definition includes the following conduct: diagnosis, treatment, use of instruments or other devices, or the prescription or administration of drugs for the relief of diseases or adverse physical or mental conditions. A person who holds himself out to the public as a “physician” or “surgeon” or with the initials “M.D.” or “D.O.” in connection with his name, and who also assumes responsibility for another person's physical or mental well-being, is engaged in the practice of medicine.

Requesting a Change in Activity Status: To change your activity status between renewal cycles, you may download the appropriate form at www.mass.gov/eohhs/gov/departments/borim/physicians/forms.html.

Non-Renewal: If you do not wish to renew your license, check the appropriate box on the renewal application, sign and return it to the Board.

Retirement: If you no longer wish to practice medicine in the Commonwealth of Massachusetts, you may apply for retired status.

You may wish to contact the Massachusetts Medical Society's Office of the General Counsel at (781) 893-4610 or by E-mail at www.massmed.org to request their educational materials on retirement from practice. If, after full consideration, you wish to retire from the practice of medicine, please check the appropriate box on the renewal application. You must also complete an Application to Retire form. This form is available on the Board's website at www.mass.gov/eohhs/gov/departments/borim/physicians/forms.html.

2) Address & Contact Information

Mailing Address: Your mailing address is pre-printed on the top of your renewal form. If there is a mistake in the address, provide the correct information in the space to the right. The Board will use this address to send all communications.

Home Address: Your home address cannot be a Post Office Box.

Business Address: Your business address cannot be a Post Office Box.

The Board has adopted the following policy regarding release of physician addresses: The Board will make a licensee's business address available to the public and include it on the Physician Profile. If a physician does not have a business address, the Board will make public and use the physician's mailing address, even if that mailing address is the same as the physician's home address.

The Board may also release a home address upon written request from a party for a showing of good cause; for example, when an attorney seeks a home address for the service of process.

The Board's regulations require that you notify the Board within 30 days, in writing, when any of your addresses change. In lieu of writing to the Board, you may change your own address by updating your Physician Profile using the Online Renewal system.

Telephone Numbers: Your home telephone number will be kept confidential. However, if a physician does not have a business telephone number, the Board may release a home telephone number upon written request from a party for a showing of good cause.

3) Email Address: Please enter your e-mail address. The Board will notify you by email when your license is renewed and your wallet card is mailed. This initiative is part of the Board's ongoing effort to use information technology to communicate with you as quickly and efficiently as possible. Please visit the Board's website at www.mass.gov/massmedboard on a regular basis to see what we are doing to better serve your needs.

4) Fax Number: Please enter the fax number where you can receive confidential communications from the Board. Enter your new fax number if it has changed since your last renewal.

5) Practice Specialty: Refer to [Reference Table 1](#). Please list the one or two ABMS specialties in which you spend the most time.

6) Board Certification: For American Board of Medical Specialties (ABMS) certifications, refer to [Reference Table 2](#). For American Osteopathic Association (AOA) certifications, refer to [Reference Table 3](#). Do not list any other board certifications, only ABMS or AOA.

7) Drug Registration Numbers: If you have a Massachusetts Controlled Substances Registration, list the number. ***If the number has changed, please enter the new number.*** If you have questions, call the Massachusetts Drug Control Program at (617) 983-6700. Please list **all** Federal (DEA) registration numbers. ***If your DEA number has changed, please enter the new number.*** If you have questions, call the Drug Enforcement Administration Unit at (800) 882-9539. If you have submitted a Notification of Intent to use Schedule III, IV, or V opioid drugs for the maintenance and detoxification of opiate addiction, under the Drug Addiction Treatment Act of 2000 and have been assigned a DEA registration number for these purposes, please include this number on your renewal application.

8) State Licenses, Current: Please indicate whether you are *currently* licensed in any other state or if you have been licensed in any other states since your last renewal.

9) State Licenses, Previous: List all states where you were previously licensed.

10) Work Sites: List all work sites in Massachusetts, including health care facilities (where you have been credentialed), private offices, clinics, nursing homes, etc. Include any affiliations with Internet-based prescribing services or companies.

For the names of health care facilities, refer to [Reference Table 4](#). List all your work sites, using an additional sheet of paper if necessary.

11) Care of Patients in Massachusetts: *Residents and Fellows:* Only record time spent rendering inpatient and outpatient care that is not part of your post-graduate training program (e.g. "moonlighting"). If none, record "0." A) *Inpatient* care in Massachusetts: include time spent in the care of inpatients in acute, chronic, rehabilitation and psychiatric hospitals, convalescent homes, penal institutions, nursing homes or other inpatient settings located in Massachusetts. B) *Outpatient* care in Massachusetts: include time spent in Massachusetts in the care of outpatients in offices, freestanding ambulatory care centers and all other outpatient settings.

Include time spent in Massachusetts providing direct patient care or service. Include related activities such as telephone and non-telephone consultations, care-related record and/or literature review, record keeping, other office work and travel time related to outpatients. If none, record "0."

Exclude hours when you are on call but are not actually providing patient care or services; also exclude any time spent outside of Massachusetts even though it may involve patient care. If none, record "0."

12) Medical Liability Insurance Information: If the name of your medical liability insurance carrier has changed or is incorrect, please make the correction in the space provided. You must enter the dates of your medical liability insurance coverage and the policy type which is located on the declaration page or certificate of insurance. You may contact your insurance agent or insurance carrier for additional information.

Indicate whether your medical liability insurance coverage is provided by an insurance carrier or a letter of credit. A letter of credit must be approved by the Board.

Inactive physicians must answer this question if they have applicable “tail” insurance.

If you are registering with Active status but do not have medical liability insurance, you must indicate by checking the box on the renewal application that you are not involved in direct/indirect patient care, that you are a government employee or provide an explanation as to why you are otherwise exempt.

13) Office-Based Surgery: “Surgery” means those procedures defined in the Massachusetts Medical Society (MMS) Office Based Surgery Guidelines under the following specific definitions: “Surgery,” “Office Based Surgery,” “Major Surgery,” “Minor Surgery,” and “Special Procedure.” You must answer “Yes” to this question if you perform any procedures in your office that are described in these definitions. (*MMS Office Based Surgery Guidelines have been endorsed by the Board and are available through the MMS and Board websites: www.massmed.org and www.mass.gov/massmedboard.*) If you answer “Yes” to this question, you must complete Form PCA-O “Office Based Surgery.”

Questions 14-21 refer to the time period beginning on the day you signed your last license renewal with this Board through and including the day you sign this renewal application.

Each question must be answered either “yes” or “no.” These questions refer to the time period from the date you signed your last renewal. You must also complete a separate Form R for each “yes” answer provided. Attach additional sheets if necessary, and photocopy Form R as needed. Please include previously reported information. An answer that simply states, “The Board already has this information” is unacceptable, and your renewal application will be considered incomplete.

14) Claims Made: Include cases or claims filed in another state. You must also report any new cases in this time period.

15) Claims Closed: You must answer “yes” even if you were named in a case or claim and subsequently dropped from it, or if the case or claim was filed or heard in another state.

16) Other Civil Lawsuits: You must report lawsuits filed against you which relate to your competency to practice medicine or your professional conduct in the practice of medicine, even if they do not allege malpractice. Examples include, but are not limited to, lawsuits filed under consumer protection, antitrust, civil rights, fraud, or intentional tort (e.g. libel and interference with contractual relations) laws. You do not have to report lawsuits that arise strictly out of business decisions made in the course of operating your practice.

If you answered “yes” to question 14, 15 or 16, please complete Form R according to the following instructions.

Basis for Allegation: Refer to [Reference Table 5](#). Select the allegation(s) that most narrowly describe the claimant’s charge(s). (This information may assist the Board in studying trends in medical malpractice.) Only allegations from the Reference Table will be accepted.

Allegations must be as specific as possible. An allegation is not an admission of fault or liability.

Section B:

Each section must be completely and accurately filled out according to the status of the claim being reported. Section A must be filled out for each claim reported, even if the status of the claim is pending. Please read through every line and give an answer to each question that pertains to the claim being reported.

Please remember to sign and date the completed Form R.

17) Criminal Charges: Being “charged with any criminal offense” includes being arrested, arraigned or indicted, even if the charges against you were subsequently dropped, dismissed, expunged or otherwise discharged.

You must report resolutions of any criminal offenses/charges including convictions for felonies and/or misdemeanors, pleas of “no contest” or nolo contendere, matters that were continued without a finding; matters for which you were placed on pretrial probation; and/or any other dispositions based on a finding of guilty or an admission to sufficient facts for a finding of guilty.

Applications for Issuance of Process include applications pending before a district court clerk magistrate to determine whether there is probable cause to believe you committed a crime and whether process (an arrest warrant or summons) should be issued against you.

If you answered “yes” to question 17, please complete Form R and attach a copy of the police report, indictment or complaint and an up-to-date court docket sheet.

18) Other Issues

A confidentiality agreement does not absolve you of your requirement to answer Question 18.

- a) asks if you have withdrawn an application for credentialing, employment or membership from any governmental authority, health care facility, group practice, employer, or professional association for reasons related to your competence to practice medicine.
- b) asks if you have taken a leave of absence from any health care facility, group practice, or employer for reasons related to your competence to practice medicine.
- c) asks if you, as an individual, have been “the subject” of an investigation by any governmental authority, health care facility, group practice, employer, or professional association.
- d) asks if you, as an individual, have been the subject of a disciplinary action taken by any governmental authority, health care facility, group practice, employer, or professional association, as defined herein.

For the purpose of answering Question 18, the terms listed below have the following meanings:

An “investigation” is any inquiry conducted by a private or governmental authority concerning you.

This question **includes, but is not limited to**, investigations, reviews, and inquiries conducted by: hospitals, clinics, nursing homes, health insurers, medical malpractice insurers, professional associations, federal agencies, and state agencies. This question includes investigations, reviews, and inquiries conducted by the Massachusetts Board of Registration in Medicine and its sub-Committees, including the Data Repository Committee and the Complaint Committee.

You do not need to report investigations of an entire facility or department. For example, an annual departmental review of complication rates is not a reportable investigation within the meaning of this question because your activities have not been singled out for review.

A “governmental authority” refers to any federal, state, county, or municipal governmental entity, including but not limited to: any medical licensing board (including Massachusetts), any agency regulating health care quality, any medical assistance authority, any regulatory authority investigating insurance fraud, and any agency that regulates the possession, dispensing, and prescribing of any controlled substances.

A “health care facility” refers to any hospital (including federal, state, county, and municipal hospitals), clinic, prison infirmary, home for unwed mothers, nursing home, or health maintenance organization. For the purpose of this question, a health care facility includes a post-graduate training program.

“Group practice” refers to any association of healthcare professionals organized for the delivery of patient care of which you are a member or partner or by which you are employed or with which you have a contract for professional services, including a partnership or limited liability partnership, limited liability company, professional corporation, or other professional business organization.

“Disciplinary action,” as defined in the Board’s regulations, is an action which adversely affects a licensee. The action can be formal or informal, oral or written, and voluntary or involuntary.

Disciplinary actions that are always reportable to the Board **include, but are not limited to**, the following or their substantial equivalents: revocation of a right or privilege, suspension of a right or privilege, censure, written reprimand or admonition, fines, and required performance of public service.

Disciplinary actions that are sometimes reportable to the Board **include, but are not limited to**, the following or their substantial equivalents: restriction of a right or privilege, non-renewal of a right or privilege, denial of a right or privilege, resignation, leave of absence, withdrawal of an application, and termination or non-renewal of a contract. These actions are reportable to the Board if they arose, directly or indirectly, from the licensee’s competence to practice medicine, or from a complaint or allegation regarding any violation of law, regulation, or bylaw.

For example, non-renewal of a medical license in another state based on the licensee’s cessation of practice there is not a disciplinary action.

For example, a leave of absence taken for family reasons or for illness is not a disciplinary action.

For example, termination or non-renewal of an employment contract due to relocation is not a disciplinary action.

A course of education, training, counseling or monitoring is reportable to the Board as a disciplinary action only if it arose out of the filing of a complaint or other formal charges reflecting on the licensee’s competence to practice.

If you answer “Yes” to any part of question 18, you must also complete Form R. At a later date, you will be asked to submit copies of supporting documentation.

19) Restriction of Controlled Substances Privileges: You do not need to answer “Yes” if you permitted your state and/or federal license(s) to expire solely because you decided to retire and your decision to retire was entirely unrelated to allegations of wrongful or otherwise irregular prescription practices.

If you answered “yes” to question 19, please complete Form R. At a later date, you will be asked to submit a copy of any written notice informing you of the pending or final action.

20) Medical License Application Withdrawn or Denial of Medical License: A medical license includes a full, limited, temporary or any other type of medical license. If you previously held a full license in a state and allowed that license to lapse, you should respond affirmatively to this question and provide the Board with the appropriate information on Form R.

21) Medical Liability Insurance Actions: You must answer “yes” if your medical liability insurance carrier has taken any of the listed actions against your policy, or if you have voluntarily taken such an action in response to any inquiry or suggestion by your carrier. You must report if your medical liability insurance carrier has placed any conditions on your coverage which are related to professional competency or conduct, including any requirement of monitoring, consultation, overheads, audits or other review. You must also report requirements of remediation, retraining, continuing education, or other course work or required attendance at educational or informational sessions.

If you answered “yes” to question 21, please complete Form R. At a later date, you may be asked to submit a copy of the notice to you of the action taken and supporting documentation indicating the reason(s) for the action.

22) Continuing Professional Development (CPD) Requirements (also known as Continuing Medical Education or CME): You may visit the Board’s website at www.mass.gov/massmedboard for additional

information on CPD requirements. The Board relies on definitions of CME categories established by the AMA. Contact the Massachusetts Medical Society's Department of Medical Education Services at (800) 322-2303, ext. 7306 regarding the availability of CME programs or visit their website at www.massmed.org. Please note that although the Board does not require you to provide evidence of your CPDs, you must maintain your own record in the event you are audited.

The Board requires that a licensee complete 100 hours of CPD within the immediately preceding two years, of which ten hours must be in the area of risk management. The majority of your CPD must relate to your primary area(s) of practice.

Documentation of CPD: Do not submit documentation of CPD credits with your renewal form. Do keep your own records, as the Board requires you to be able to document CPD credits. You must maintain documentation for one full license renewal cycle after the credits were earned.

Category 1: You must complete at least 40 hours in the American Medical Association (AMA) Physician Recognition Award (PRA), Category 1.

Category 2: You may obtain credit for no more than 60 hours in Category 2.

Board Regulations: You are expected to be aware of the contents of the Board's regulations. The Board requires that you spend two hours reading the Board's regulations or studying the Board's policies or official publications of the Board. The Board's regulations are available on the Board's website at <http://www.mass.gov/eohhs/gov/departments/borim/physicians/regulations/regulations-guidelines-and-policies.html> or you may call the State Bookstore at (617) 727-2834 or access its website at www.sec.state.ma.us/spr/spridx.htm.

Risk Management: You must accrue ten credits of risk management study. Four credits must be in Category 1. The additional six credits may be in either Category 1 or Category 2.

Risk management study must include instruction in medical malpractice prevention, and may include courses in medical ethics, quality assurance, medical-legal issues, patient relations, non-economic aspects of practice management, or courses designed to reduce the likelihood of medical malpractice through means other than increasing the licensee's medical education and technical competence. Please review the CPD Booklet on the Board's website at www.mass.gov/eohhs/gov/departments/borim/physicians/physicians-frequently-asked-questions.html.

Board Certification or Recertification: Becoming certified or recertified by a specialty board accredited by the American Board of Medical Specialties (ABMS) or the American Osteopathic Association (AOA) will be deemed the equivalent of 25 credits in Category 1. A licensee will still be required to obtain four credits in Category 1 risk management. These credits will apply to the license renewal cycle in which the licensee receives notification from the specialty board that he has passed the exam for 25 credits in Category 1.

Medically Related Degrees: Earning an advanced degree in an area related to medicine, such as a master's degree in public health, earns 25 Category 1 credits following award of the degree.

Volunteers for the Board: Each hour of volunteer work performed for the Board of Registration in Medicine up to a maximum of 20 hours for each two-year renewal cycle, will be deemed the equivalent of one hour of Category 1 CPD credit. A licensee may apply four of these credits to fulfill his Category 1 risk management requirement. The licensee must obtain a certification of such service signed by the Executive Director as documentation of this credit.

Example: If you volunteer at the Board of Registration in Medicine for 18 hours over a two-year period, you are eligible for 18 Category 1 credits. If you wish, you may apply four of these 18 towards your risk management Category 1 requirement and the other 14 towards your general Category 1 requirement. You

will then have to obtain the remaining 22 Category 1 credits in the usual manner in order to fulfill the requirement.

Medical Examiners: In recognition of the importance of the public service rendered by the Medical Examiner's Office, and in support of the needs of a sister state agency, the Board will give credit to active medical examiners in the amount of four hours of required Category 1 risk management CPD. Upon submission of documentation of active service as a medical examiner or of attendance at appropriate professional society meetings, the Board will give credit to active medical examiners in the amount of four hours of required Category 1 risk management CPD. Documentation must be submitted to and approved by the Licensing Committee.

Waiver of CPD requirements: You may apply to the Board for a CPD waiver if you cannot complete your CPD requirement by the date of your renewal. A CPD waiver allows additional time to complete the CPD requirements; it does not excuse the requirement. Submit your CPD waiver request form with your completed renewal form. You may download the CPD Waiver Request form from the Board's website. It must be submitted no later than 30 days prior to your renewal date. The waiver request must be granted before your license will be renewed. The request must contain the following information in a written statement signed under the penalties of perjury:

- (a) An explanation of your failure to complete the requirement.
- (b) A list of the CPD hours you believe you have completed.
- (c) Your plan for satisfying the Board's CPD requirement.

Grounds for Granting a CPD Waiver: The Board, in its discretion, will grant a waiver of a CPD requirement. The grounds include:

- (a) Prolonged illness of a licensee.
- (b) Inaccessibility or unavailability of CPD activities.

Exemption from CPD Requirements: You do not need to fulfill CPD requirements under the following circumstances:

Inactive Status: If you have placed your license on inactive status, you are exempt from the CPD requirement.

Residency/Fellowship: If you are enrolled in an ACGME-approved residency program or fellowship within the year prior to the renewal date, or if you are in the first or second year of a non-ACGME approved fellowship, you are exempt from the CPD requirements.

Calculating credits: If you are completing an ACGME-approved residency or fellowship program, you should start earning credits beginning with the first full (i.e., two-year) license renewal cycle after your program has ended.

For example, if your residency program ended on July 1, 2007, and you next renew your license on April 30, 2008, you should begin to earn credits as of April 30, 2008, and fulfill the basic biennial CPD requirement during the period that begins on April 30, 2008 and ends on April 30, 2010. You need not earn any CPD credits during the period from July 1, 2007 to April 30, 2008.

If you are a newly licensed or newly active physician, and your license has been renewed in one year or less from the date of original licensure or activation of license, you need not earn any CPD credits during that abbreviated cycle. If your renewal cycle is longer than one year but shorter than two years, you must meet one-half of the basic biennial CPD requirements. For example, if you first obtained a full license in January, 2008, and your renewal occurs in March, 2009, you must earn one-half of the usual number of credits: 20 Category 1 credits, at least two in risk management, and 30 Category 2 credits, at least three in risk

management. In addition, one of these hours must consist of studying the Board's regulations, and at least 26 of them must be in your primary area(s) of practice.

PART B

Questions 23 and 24 refer to the time period from the date you signed your last renewal through and including the date that you sign this renewal application. In its capacity as a licensing agency, the Board asks questions that may constitute prohibited pre-employment inquiries into disability, under the Americans with Disabilities Act (ADA), if asked by an employer prior to an offer of employment. These questions must be answered or your application will not be considered complete. This portion of the application is not a public record, and is held as confidential information unless you expressly authorize the Board to release it to a particular party. Under the law, the Board may also share the information with legally designated agencies, such as other state licensing boards and law enforcement agencies. Designated agencies are required to maintain the confidentiality of this information consistent with the law.

23) Medical Condition: "Medical condition" includes physiological and psychological conditions or disorders including, but not limited to orthopedic, sensory, cognitive, neuromuscular, neurological, psychiatric, infectious, cardiovascular and metabolic conditions and disorders. "Medical condition" includes learning disabilities and chemical dependency.

"Ability to practice medicine" includes the following:

- The cognitive capacity to make appropriate clinical diagnoses, exercise reasoned medical judgments, and to learn and keep abreast of medical developments;
- the ability to communicate those judgments and medical information to patients and other health care providers, with or without the use of aids or devices such as voice amplifiers; and
- the physical capability to perform medical tasks such as physical examination and surgical procedures, with or without the use of aids or devices.

If you answered "Yes" to question 23, please provide details in the space following the question on Part B. Describe the medical condition, setting forth the specifics of your condition and any related treatment, including dates, diagnoses, and the name and address of any treating physician, mental health provider, or other health care professional. In addition, set forth any adjustments or interventions you may have made or taken to ameliorate or address the impact of your medical condition on your practice, including a change of specialty or field of practice, or participation in any supervised rehabilitation program, professional assistance or retraining program or monitoring program. At a later date, you may be asked to submit a medical report from your physician regarding your condition and documentation of compliance with any monitoring program, such as Physician Health Services, Inc., a Massachusetts Medical Society corporation.

24) Use of Chemical Substances: "Chemical substances" includes alcohol, drugs or medications, including those drugs or medications (controlled substances) taken pursuant to a valid prescription for a legitimate medical purpose and in accordance with this direction, as well as those used illegally. Illegal use of controlled substances includes the use of substances obtained illegally (e.g., heroin or cocaine) as well as the use of substances in an illegal manner (e.g., use of prescription drugs which are obtained without a valid prescription or not taken in accordance with the directions of a licensed health care practitioner).

If you answered "Yes" to question 24, please provide details in the space following the question on Part B. If you have obtained medical treatment related to your use of chemical substances, set forth the specifics of your treatment, including dates, diagnoses, the name and address of any treatment facility (inpatient or outpatient) and the name and address of any treating physician, psychiatrist, mental health or drug counselor, or other health care professional. In addition, set forth any adjustments or interventions you may have made or taken to ameliorate or address the impact of your use of chemical substances on your

practice, including participation in any supervised rehabilitation program, professional assistance program, or monitoring program. At a later date, you may be asked to submit a medical report from your treating physician regarding your condition and documentation of compliance with any monitoring program, such as Physician Health Services, Inc., to ensure successful rehabilitation.

You have a right to elect not to answer the above question if you have reasonable cause to believe that answering may expose you to the possibility of criminal prosecution. In that event, you may assert the Fifth Amendment privilege against self-incrimination. Any claim of Fifth Amendment privilege must be made in good faith. If you choose to assert the Fifth Amendment privilege, you must do so in writing. Your renewal application will be processed if you claim the privilege.

NOTE TO THE CHEMICALLY DEPENDENT PHYSICIAN

If you are chemically dependent, the Board encourages you to seek assistance voluntarily. When the Board receives notice of impairment or dependency, its policy is to protect the public and also to ensure rehabilitation through the physician's participation in approved treatment programs and supervised, structured aftercare. To ensure successful rehabilitation, the Board's Chemically Dependent Physician Policy relies on cooperation between the Board and groups like Physician Health Services, Inc.

25) Electronic Health Records Proficiency: Pursuant to M.G.L. c. 112, § 2, an applicant for licensure must demonstrate proficiency in the use of electronic health records (EHR). This is a one-time requirement. Please indicate how you demonstrate proficiency or the reason you are claiming an exemption.

26) Requirement to Complete Training to Recognize and Report Suspected Child Abuse or Neglect:

M.G.L. c. 119, §51A(k) requires all mandated reporters, professionally licensed by the Commonwealth, to complete training to recognize and report suspected child abuse or neglect. Physicians are one category of mandated reporters and must have completed the training prior to submitting an initial license application to the Board. The training is a one-time requirement, but physicians must certify on each renewal that they have complied with the training requirement through one of the following methods:

- Received training in child abuse or neglect assessment in medical school education or postgraduate training;
- Completed a hospital sponsored training program in recognizing the signs of child abuse and neglect;
- Completed continuing professional development credits in identifying and reporting child abuse and neglect;
- Completed an on-line training program (i.e., The Middlesex Children's Advocacy Center's program "51A Online Mandated Reporter Training: Recognizing and Reporting Child Abuse, Neglect, and Exploitation" www.middlesexcac.org/51A-reporter-training); or
- Completed a specialized certification (i.e., Child Abuse Pediatrics).

PART C

PHYSICIAN PROFILE: You must review your Physician Profile on the Board's website and confirm that the information is accurate, <http://profiles.ehs.state.ma.us/Profiles/Pages/FindAPhysician.aspx>. Please check the appropriate box on the renewal application to confirm that you have reviewed your Physician Profile and/or if you are attaching a copy of the corrected Profile with your renewal application. If your status is Inactive, you will not have a Profile.

CERTIFICATIONS: Please review the Massachusetts General Laws website. The full text of the Massachusetts statutes cited herein is available at <https://malegislature.gov/Laws/GeneralLaws/Search>.

1) Reporting Child Abuse: Pursuant to G.L. c. 119, Section 51A, physicians are obligated to report the abuse or neglect of children. If, in your professional capacity, you determine that a child is physically dependent upon an addictive drug at birth or you have reasonable cause to believe that a child under the age of eighteen years is suffering physical or emotional injury resulting from:

1. Abuse, including sexual abuse, or
2. Neglect, including malnutrition,

you must immediately make an oral report of such condition to the Department of Social Services. You must submit a written report within 48 hours of the oral communication. If you are a member of a medical or other public or private institution, school or facility, the report may be made either to the institution or facility, or directly to the Department of Social Services. If you have a reasonable cause to believe that the abuse or neglect described above has resulted in death, that death must be reported immediately to the district attorney of the county where the death occurred and to the medical examiner. Failure to make any of these reports is punishable by a fine of up to \$1,000.

2) Reporting Disabled Persons Abuse: Pursuant to G.L. c. 19C, Section 10, physicians are obligated to report the abuse or neglect of disabled persons. A disabled person is a person between the ages of eighteen and fifty-nine, inclusive, who is mentally retarded, or who is otherwise mentally or physically disabled and as a result of such mental or physical disability is wholly or partially dependent on others to meet his daily living needs. (An individual sixty years of age or over is an elderly person – please refer to the section regarding the reporting of elder abuse.)

If, in your professional capacity, you have reasonable cause to believe that a disabled person is suffering serious physical or emotional injury as a result of an act or omission, you must immediately make a verbal report of such information or cause a report to be made to the Disabled Persons Protection Commission and must file a written report within forty-eight hours after such oral report. If you have a reasonable cause to believe that the abuse or neglect described above has resulted in death, you must immediately report such death, in writing, to the Disabled Persons Protection Commission, to the district attorney for the county in which such death occurred, and to the medical examiner. Failure to make any of these reports is punishable by a fine of up to \$1,000.

3) Reporting Elder Abuse: Pursuant to G.L. c. 19A, Section 15, physicians are obligated to report the abuse, neglect or financial exploitation of elderly persons. If, in your professional capacity, you have reasonable cause to believe that a person sixty years of age or over is suffering serious physical or emotional injury as a result of an act or omission, or financial exploitation as a result of an act or omission by another person which causes a substantial monetary or property loss to the elderly person and a substantial monetary or property gain to the other person, you must immediately make a verbal report of such information or cause a report to be made to the Department of Elder Affairs and must, within forty-eight hours, make a written report to the Department of Elder Affairs. If you have a reasonable cause to believe that the abuse or neglect described above has resulted in death, that death must be reported to the Department of Elder Affairs. Failure to make any of these reports is punishable by a fine of up to \$100.

4) Reporting Treatment of Wounds, Burns and Other Injuries: Pursuant to G.L. c. 112, Section 12A, a physician attending or treating a case of bullet wound, gunshot wound, powder burn or any other injury arising from or caused by the discharge of a gun, pistol, BB gun or other air rifle or firearm, or examining or treating a person with a burn injury affecting five percent or more of the surface area of his body, or, whenever any such case is treated in a hospital or other institution, the manager or other person in charge, shall report such case at once to the colonel of the state police and to the police of the town where such physician, hospital or institution is located. In the case of burn injuries, notification shall be made at once to the state fire marshal and to the police of the town where the burn injury occurred. In addition, every physician attending or treating a case of wound or injury caused by a knife or sharp or pointed instrument shall, if in his opinion a criminal act was involved, report such case forthwith to the police authorities of the town in which he attended or treated such wound or injury. Failure to make any of these reports is punishable by a fine up to \$100.

5) Reporting Treatment of Victims of Rape or Sexual Assault: Pursuant to G.L. c. 112, Section 12A 1/2, a physician attending, treating or examining a victim of rape or sexual assault, or whenever any such case is treated in a hospital or other institution, the manager or other person in charge, shall report such case at once to the criminal history systems board and to the police of the town where the rape or sexual assault occurred but shall not include the victim's name, address or any other identifying information. The report shall describe the general area where the attack occurred. Failure to make this report is punishable by a fine of up to \$100.

6) Board Reporting Requirements: Pursuant to G.L. c. 112, Section 5F, you are required to report to the Board when you have a reasonable basis to believe a physician has violated the provisions of G.L. c. 112, Section 5 or any Board regulations, except as otherwise prohibited by law.

7) Medicare Balance Billing Statement: Pursuant to G.L. c. 112, Section 2, physicians are prohibited from charging to or collecting from a Medicare beneficiary any amount in excess of the fee schedule amount allowed by Medicare. This ban on balance billing applies to all physicians in the state who treat Medicare patients. The law does not mandate participation in the Medicare program. If a physician treats Medicare patients, he or she must comply with the law.

8) Massachusetts Tax Reporting and Payment: Pursuant to G.L. c. 62C, Section 49A, you must certify under penalties of perjury that you have complied with all laws of the Commonwealth related to taxes, reporting of employees and contractors, and withholding and remitting of child support.

If you have not filed or paid your state taxes, and have not filed an application for an extension of time to file, or a good faith application for an abatement of your taxes, and do not have a petition pending before the Appellate Tax Board contesting the tax, you cannot sign this certification. If you sign but have not filed or paid your state taxes, or applied for an extension of time to file, and have not filed for abatement and have not petitioned to contest the tax, the Board will be notified and will institute proceedings to suspend or revoke your license to practice medicine.

9) Reporting of Employees and Contractors: You are required to file tax returns and pay any tax required under G.L. Chapter 62E, relating to the reporting of employees and contractors.

If you have not filed or paid your withholding taxes, and have not filed an application for an abatement or have a petition pending before the Appellate Tax Board contesting the tax, you cannot sign this certification.

10) Withholding and Remitting Child Support: You are required to comply with the provisions of G.L.c. 119A relating to the withholding and remitting of child support payments.

If you have not filed or paid your child support, or you have failed to have child support withheld from your wages when required by law, you cannot sign this certification.

11) Patient Care Assessment: Pursuant to G.L. c. 112, Section 5, and the Board's regulations at 243 CMR 3.00, you are required to participate in Qualified Patient Care Assessment (PCA) programs established at the health care facilities where you practice. (For the definition of a Qualified PCA program, see 243 CMR 3.02 and 3.03.) The regulations require health care facilities, as part of their PCA program, to report "Major Incidents" to the Board, (243 CMR 3.08). There are also PCA regulations that apply to your office setting and require you to submit "Incident Reports" to the Board under certain circumstances, e.g., certain unplanned transfers from your office and certain unexpected deaths, or major or permanent bodily impairments, (243 CMR 3.11).

12) Disclosure of Ownership Interest in Physical Therapy Services: Pursuant to G.L. c. 112, Section 12AA, a physician who refers a patient for physical therapy services to any partnership, corporation, firm or other legal entity in which the physician has a financial ownership interest shall disclose such interest to the Board. Such disclosure shall contain the names and ownership interests of all other parties owning an interest in such physical therapy services. In addition, a physician shall also disclose such ownership interest to the patient and shall inform the patient that such services may be available from other physical therapy services in the patient's community.

13) Health Insurance Portability and Accountability Act (HIPAA): You are required to be aware of your obligations and responsibilities under HIPAA, including the requirement to obtain and provide to the Board a National Provider Identifier (NPI) number.

14) Compliance with HIPAA: You are required to understand and be in compliance with HIPAA and all other federal and state obligations placed upon you as a physician.

15) Criminal Record Check: As an applicant for license renewal, a criminal record check may be conducted for conviction and pending criminal case information from the Criminal History Systems Board. Information obtained will not necessarily disqualify you for license renewal.

Signature: You must sign your renewal application. You will be certifying, under the penalties of perjury, the truth of the information provided on the renewal application, Parts A, B, C, Form R, PCA-O form and any attachments. Providing false or inaccurate information could result in severe consequences, including revocation of your license or other disciplinary action by the Board, and/or criminal prosecution for perjury.

PLEASE REMEMBER: Whenever you change your address, the Board's regulations require that you notify the Board within 30 days.

Make a copy of your renewal application and all attachments for your records—you will need copies for credentialing and for other purposes. The Board will charge a fee for each copy it provides and this may take up to 6 weeks.

REFERENCE TABLES

TABLE 1: PRACTICE SPECIALTY

Acupuncture
Addiction Medicine
Addiction Psychiatry
Adolescent Medicine
Adolescent Psychiatry
Aerospace Medicine
Allergy
Allergy and Immunology
Anesthesiology
Cardiology Interventional
Cardiovascular Diseases
Child/Adolescent Psychiatry
Cosmetic Surgery
Critical Care Medicine
Cytopathology
Dermatology
Dermatopathology
Diabetes
Diagnostic Laboratory Immunology
Electrophysiology Pacing
Emergency Medicine
EMG/Neuromuscular Disease
Endocrinology
Endocrinology, Reproductive
Facial Plastic Surgery, Otolaryngology
Family Medicine
Forensic Medicine
Forensic Psychiatry
Gastroenterology
General Practice
General Preventive Medicine
Genetics
Geriatric Psychiatry
Geriatrics
Gynecology (no obstetrics)
Gynecology, Oncology
Hematology
Hematology/Oncology
Hepatology
Hospitalist
Immunology
Immunopathology
Infectious Diseases
Internal Medicine
Legal Medicine
Maternal & Fetal Medicine
Medical Microbiology
Medicine/Pediatrics
Movement Disorders
Neonatal-Perinatal Medicine
Neoplastic Diseases
Nephrology
Neurology
Neurology, Behavioral
Neurology, Child
Neurology/Psychiatry
Neuropathology
Neurophysiology, clinical
Neuroradiology
Nuclear Medicine
Nuclear Radiology
Nutrition
Obstetrics & Gynecology
Obstetrics (no gynecology)
Occupational Medicine
Oncology, Medical
Ophthalmology

Orthopedics, (no surgery)
Otolaryngology
Otology/Neurotology
Otorhinolaryngology
Otorhinolaryngology/Otolaryngology
Pain Management
Palliative Medicine
Pathology
Pathology, Anatomic
Pathology, Blood Banking
Pathology, Chemical
Pathology, Clinical
Pathology, Forensic
Pathology, Radioisotopic
Pediatric Critical Care Medicine
Pediatric Emergency Medicine
Pediatric Gastroenterology
Pediatric Infectious Disease
Pediatric Neurology
Pediatric Otolaryngology
Pediatric Pathology
Pediatric Pulmonology
Pediatric Sports Medicine
Pediatric, Allergy
Pediatric, Cardiology
Pediatric, Endocrinology
Pediatric, Hematology-Oncology
Pediatric, Nephrology
Pediatric, Rheumatology
Pediatrics
Pharmacology Clinical
Physiatry
Physical Medicine & Rehabilitation
Preventive Medicine
Psychiatry
Psychiatry, Child PPCP Pediatrics/
Psychiatry/Child Psychiatry
Psychoanalysis
Psychosomatic Medicine
Public Health
Pulmonary Critical Care
Pulmonary Diseases
Radiation Oncology
Radiology
Radiology Pediatric
Radiology, Diagnostic
Radiology, Therapeutic
Rheumatology
Sports Medicine
Sleep Movement
Stem Cell Transplant
Surgery, Abdominal
Surgery, Cardiothoracic
Surgery, Cardiovascular
Surgery, Colon & Rectal
Surgery, Critical Care
Surgery, General
Surgery, Hand
Surgery, Head & Neck
Surgery, Neurological
Surgery, Oncology
Surgery, Orthopedic
Surgery, Pediatric
Surgery, Plastic
Surgery, Thoracic
Surgery, Trauma
Surgery, Urological
Surgery, Vascular

Undersea Medicine
Unspecified Specialty
Urology (no surgery)
Vascular /Interventional Radiology

TABLE 2: AMERICAN BOARD OF MEDICAL SPECIALITIES (ABMS)

Board of Allergy & Immunology

Allergy & Immunology
Clinical & Laboratory Immunology

Board of Anesthesiology

Anesthesiology
Critical Care Medicine
Pain Medicine

Board of Colon & Rectal Surgery

Colon & Rectal Surgery

Board of Dermatology

Clinical & Laboratory Dermatological
Immunology
Dermatology
Dermatopathology
Pediatric Dermatology

Board of Emergency Medicine

Emergency Medicine
Medical Toxicology
Pediatric Emergency Medicine
Sports Medicine
Undersea & Hyperbaric Medicine

Board of Family Medicine

Adolescent Medicine
Family Practice
Geriatric Medicine
Sports Medicine

Board of Internal Medicine

Adolescent Medicine
Cardiovascular Disease
Clinical & Laboratory Immunology
Clinical Cardiac Electrophysiology
Critical Care Medicine
Endocrinology, Diabetes & Metabolism
Gastroenterology
Geriatric Medicine
Hematology
Infectious Disease
Internal Medicine
Interventional Cardiology
Medical Oncology
Nephrology
Pulmonary Disease
Rheumatology
Sports Medicine

Board of Medical Genetics

Clinical Biochemical Genetics
Clinical Cytogenetics
Clinical Genetics (M.D.)
Clinical Molecular Genetics
Molecular Genetic Pathology
Ph.D. Medical Genetics

TABLE 2: AMERICAN BOARD OF MEDICAL SPECIALITIES (ABMS), continued:

Board of Neurological Surgery
Neurological Surgery

Board of Nuclear Medicine
Nuclear Medicine

Board of Obstetrics & Gynecology
Critical Care Medicine
Gynecologic Oncology
Maternal & Fetal Medicine
Obstetrics & Gynecology
Reproductive Endocrinology

Board of Ophthalmology
Ophthalmology

Board of Orthopaedic Surgery
Orthopaedic Surgery
Orthopaedic Sports Medicine
Surgery of the Hand

Board of Otolaryngology
Otolaryngology
Neurotology
Pediatric Otolaryngology
Plastic Surgery within the Head and Neck

Board of Pathology
Anatomic Pathology & Clinical Pathology
Anatomic Pathology
Blood Banking/Transfusion Medicine
Chemical Pathology
Clinical Pathology
Cytopathology
Dermatopathology
Forensic Pathology
Hematology
Medical Microbiology
Molecular Genetic Pathology
Neuropathology
Pediatric Pathology

Board of Pediatrics
Adolescent Medicine
Clinical & Laboratory Immunology
Medical Toxicology
Neonatal-Perinatal Medicine
Pediatric Cardiology
Pediatric Critical Care Medicine
Developmental-Behavioral Pediatrics
Pediatric Emergency Medicine
Pediatric Endocrinology
Pediatric Gastroenterology
Pediatric Hematology-Oncology
Pediatric Infectious Diseases
Pediatric Nephrology
Neurodevelopmental Disabilities
Pediatric Pulmonology
Pediatric Rheumatology
Sports Medicine
Pediatrics

Board of Physical Medicine & Rehabilitation
Pain Medicine

Pediatric Rehabilitation Medicine
Physical Medicine & Rehabilitation
Spinal Cord Injury Medicine

Board of Plastic Surgery
Plastic Surgery
Plastic Surgery within the Head & Neck
Surgery of the Hand

Board of Preventive Medicine
Aerospace Medicine
Medical Toxicology
Occupational Medicine
Public Health & General Preventive Medicine
Undersea & Hyperbaric Medicine

Board of Psychiatry & Neurology
Addiction Psychiatry
Child and Adolescent Psychiatry
Clinical Neurophysiology
Forensic Psychiatry
Geriatric Psychiatry
Neurology
Neurodevelopmental Disabilities
Neurology with Special Qualifications in Child Neurology
Pain Medicine
Psychiatry
Psychosomatic Medicine
Vascular Neurology

Board of Radiology
Diagnostic Radiology
Neuroradiology
Nuclear Radiology
Pediatric Radiology
Radiation Oncology
Radiological Physics
Vascular and Interventional Radiology

Board of Surgery
Pediatric Surgery
Surgery
Surgery of the Hand
Surgical Critical Care
Vascular Surgery

Board of Thoracic Surgery
Thoracic Surgery

Board of Urology
Urology

TABLE 3: AMERICAN OSTEO-PATHIC ASSOCIATION (AOA) BOARDS

Board of Anesthesiology
Addiction Medicine
Anesthesiology
Critical Care Medicine
Pain Management

Board of Dermatology
Dermatology
Dermatopathology
MOHS-Micrographic Surgery

Board of Emergency Medicine
Emergency Medical Services
Emergency Medicine
Sports Medicine
Medical Toxicology

Board of Family Physicians
Addiction Medicine
Adolescent/Young Adult Medicine
Family Practice (and OMT)
Geriatric Medicine
Sports Medicine

Board of Internal Medicine
Addiction Medicine
Allergy/Immunology
Cardiology
Clinical Cardiac Electrophysiology
Critical Care Medicine
Endocrinology
Gastroenterology
Geriatric Medicine
Hematology
Hematology/Oncology
Infectious Disease
Internal Medicine
Interventional Cardiology
Nephrology
Oncology
Pulmonary Diseases
Rheumatology
Sports Medicine

Board of Neurology & Psychiatry
Addiction Medicine
Child/Adolescent Neurology
Child/Adolescent Psychiatry
Neurology
Neurology/Psychiatry
Neurophysiology
Psychiatry
Sports Medicine

Board of Neuromusculoskeletal Medicine
Neuromusculoskeletal Medicine & OMM
Special Proficiency in Neuromusculoskeletal Medicine
Sports Medicine

Board of Nuclear Medicine
In Vivo and In Vitro Nuclear Med
Nuclear Cardiology
Nuclear Imaging and Therapy
Nuclear Medicine

Board of Obstetrics & Gynecology
Gynecologic Oncology
Maternal and Fetal Medicine
Obstetrics & Gynecologic Surgery
Obstetrics and Gynecology
Reproductive Endocrinology

Board of Ophthalmology & Otolaryngology
Facial Plastic Surgery
Ophthalmology
Otolaryngic Allergy
Otolaryngology
Otolaryngology/Facial Plastic Surgery

**TABLE 3: AMERICAN OSTEO-
PATHIC ASSOCIATION (AOA).
continued**

Board of Orthopedic Surgery

Hand Surgery
Orthopedic Surgery

Board of Pathology

Anatomic Pathology and Laboratory
Medicine
Blood Banking/Transfusion Medicine
Chemical Pathology
Cytopathology
Dermatopathology
Forensic Pathology
Hematology-Pathology
Immunopathology
Laboratory Medicine
Anatomic Pathology
Medical Microbiology
Neuropathology

Board of Pediatrics

Adolescent & Young Adult Medicine
Neonatology
Pediatric Allergy/Immunology
Pediatric Cardiology
Pediatric Endocrinology
Pediatric Hematology/Oncology
Pediatric Infectious Diseases
Pediatric Intensive Care
Pediatric Nephrology
Pediatric Pulmonology
Pediatrics
Sports Medicine

**Board of Physical Medicine &
Rehabilitation**

Physical Medicine and Rehabilitation
Sports Medicine

Board of Preventive Medicine

Occupational Medicine
Preventive Medicine/Aerospace
Medicine
Preventive Medicine/Occupational
-Environmental Medicine
Preventive Medicine/Occupational
Preventive Medicine/Public Health
Sports Medicine

Board of Proctology

Proctology

Board of Radiology

Angiography & Interventional
Radiology
Body Imaging
Diagnostic Radiology
Diagnostic Roentgenology
Diagnostic Ultrasound
Neuroradiology
Nuclear Radiology
Pediatric Radiology
Radiation Oncology
Radiation Therapy
Radiology
Roentgenology

Board of Surgery

General Vascular Surgery
Neurological Surgery
Plastic and Reconstructive Surgery
Surgery (general)
Surgical Critical Care
Thoracic Cardiovascular Surgery
Urological Surgery

**TABLE 4: HEALTH CARE
FACILITIES**

AdCare Hospital of Worcester
Addison Gilbert (A Campus of
Northeast Hospitals)
Anna Jaques Hospital
Arbour Hospital (The)
Arbour-HRI Hospital
Athol Memorial Hospital
Austen Riggs Center, Inc.
Baldpate Hospital
Baystate Mary Lane Hospital
Baystate Medical Center
Berkshire Health Systems
Beth Israel Deaconess Medical Center
Beverly Hospital (A Campus of
Northeast Hospitals)
Boston Medical Center
Bournewood Hospital
Braintree Hospital
Bridgewater State Hospital
Brigham & Women's Hospital
Brockton Hospital, Inc.
Cambridge Health Alliance
Cambridge Public Health Commission
Cape Cod Health Systems
Caritas Norwood Hospital
Caritas St. Elizabeth's Medical Center
Caritas Southwood Hospital
Caritas Good Samaritan Med. Center
Carney Hospital (The)
Central N.E. Health Alliance Hospital
Charles River Hospital
Children's Hospital
Choate Health System (Caulfield
Center)
Cooley Dickinson Hospital (The)
Dana Farber Cancer Institute
Deaconess-Glover Hospital
Deaconess-Nashoba Hospital
Deaconess-Waltham Hospital
Dr. John C. Corrigan Mental Health
Center
East Bay Surgery Center
Edith Nourse Rogers Mem. VA Hospital
Emerson Hospital
Erich Lindemann Mental Health Center
Fairlawn Rehabilitation Hospital, Inc.
Fairview Hospital
Falmouth Hospital
Faulkner Hospital
Franciscan Hospital for Children
Franklin Medical Center
Fuller Memorial Hospital
Hallmark Health System Lawrence
Memorial Hospital
Hallmark Health System –Malden
Hospital
Hallmark Health System – Melose –
Wakefield Hospital

Hallmark Health System – Whidden
Memorial Hospital
Harrington Memorial Hospital
Harvard University Health Services
HEALTHSOUTH Braintree Rehab
Hospital
HEALTHSOUTH New England Rehab
Hospital
HEALTHSOUTH Rehab Hosp of
Western Mass
Hebrew Rehabilitation Center For Aged
Heywood Memorial Hospital
Hillcrest Hospital
Holy Family Hospital & Medical Center
Holyoke Medical Center
Hubbard Regional Hospital
Jewish Memorial Hospital
Jordan Hospital, Inc.
Kindred Hospital - Boston
Kindred Hospital – Boston North Shore
L. F. Quigley Memorial Hospital
Lahey Clinic
Lawrence General Hospital
Lemuel Shattuck Hospital
Lowell General Hospital
M.I.T. Medical Department
Marlborough Hospital (UMass
Memorial)
Martha's Vineyard Hospital
Massachusetts Corrections Institute
Hospital
Massachusetts Eye & Ear Infirmary
Massachusetts General Hospital
Massachusetts Hosp. School
Massachusetts Mental Health Center
McLean Hospital
Mediplex Rehab Hospital
Mercy Medical Center
Merrimack Valley Hospital
MetroWest Medical Center
Milford-Whitinsville Regional Hospital
Milton Hospital
Morton Hospital & Medical Center
Mount Auburn Hospital
Nantucket Cottage Hospital
Nashoba Valley Medical Center
New England Baptist Hospital
New Rehabilitation Hospital
New England Sinai Hosp. & Rehab
Center
Newton-Wellesley Hospital
Noble Hospital
North Adams Regional Hospital
North Shore Medical Center- Salem
Hospital
North Shore Children's Hospital (North
Shore Medical Center)
Northeast Hospital Corporation
Olympus Specialty Hospital (Braintree)
Parkwood Hospital
Parkview Specialty Hospital
Pembroke Hospital AMI
Pocasset Mental Health Center
Providence Behavioral Health
System
Quincy Medical Center
Quincy Mental Health Center
Quigley (Lawrence) Memorial Hospital
Rehab Hospital of the Cape & Islands
Saints Memorial Medical Center

**TABLE 4: HEALTH CARE
FACILITIES, continued**

Saint Vincent Hospital at Worcester Medical Center
Salem Hospital (North Shore Medical Center)
Shaughnessy-Kaplan Rehabilitation Hospital
Shriners Hospital-Burns Institute (Boston)
Shriners Hospital for Crippled Children
Soldiers' Home in Holyoke
Solomon Mental Health Center
Somerville Hospital
Sterling Medical Center
South Shore Hospital
Southcoast Hospitals Group-Charlton Site
Southcoast Hospitals Group-St. Luke's Site
Southcoast Hospitals Grp-Tobey Hosp Site
Spaulding Rehabilitation Hospital
St. Anne's Hospital
Stillman Infirmary, Harvard U Health Services
Sturdy Memorial Hospital, Inc.
Taunton State Hospital
Tewksbury Hospital
Tufts New England Medical Center
UMass Health System/Clinton Hospital
UMass Health System/Marlborough Hospital
UMass Memorial Medical Ctr.
Union Hospital
VA Hospital-Bedford
VA Hospital-Brockton
VA Hospital-Jamaica Plain
VA Hospital-Norhampton
VA Hospital-West Roxbury
VA Medical Center (Leeds)
Weldon Rehabilitation Hospital
Westborough State Hospital
Western Mass. Hospital
Westwood Lodge Hospital AMI
Whidden Memorial Hospital
Whittier Rehabilitation Hosp./Haverhill
Whittier Rehabilitation Hosp./Westboro
Winchester Hospital
Wing Memorial Hospital & Medical Center
Worcester State Hospital
Youville Hospital & Rehab Center

Other Facilities

Clinic
Infirmary
Magnetic Resonance Imaging Center
Mental Health Clinic
Nursing Home
Out-of-State Hospital

TABLE 5: BASIS FOR ALLEGATION

ABUSE OF (PATIENTS,
EMPLOYEE(S)/PEER(S)

*Abuse of Employee(s) /Peer(s) -
Physical
Abuse of Patient(s) - Physical*

Sexual misconduct
Sexual misconduct - Verbal

ADMINISTRATIVE PROBLEMS

Academic research fraud
Billing for services not rendered
Billing fraud (not Medicaid/Medicare)
Breach of confidentiality
False or deceptive advertising
Inadequate documentation/patient records
Insurance balance billing (not Medicaid/Medicare)
Medicaid/Medicare
Medicaid/Medicare balance billing

SUPERVISION

Fully licensed physician
Limited licensee (e.g. resident)
Nurse or other employee
Physician's assistant

DIAGNOSIS RELATED

Delay in diagnosis
Failure to Diagnose
Abdominal problems (not appendicitis or ulcer)
AIDS/AIDS Related Complex/HIV
Appendicitis
Bladder problem
Bone cancer
Bowel problem
Breast cancer
Cancer (unspecified)
Cardiac disorder (not myocardial infarction)
Circulatory problem
Colon/rectal cancer
Diabetes
Eye disorder
Fracture/Dislocation
Gall Bladder disorder
Genetic disorder
Hemorrhage
Hernia
Hodgkin's disease
Implanted foreign body
Infection
Kidney disorder
Liver disorder
Liver/kidney/pancreas cancer
Lung cancer
Lyme disease
Meningitis
Myocardial infarction
Neurological disorder
Orthopedic problem (not fracture/dislocation)
Ovarian/cervical cancer
Pneumonia/pneumothorax
Respiratory problem
Skin cancer
Tendon injury
Testicular torsion
Testicular/prostate cancer
Tumor
Ulcer or complication(s) of ulcer
Failure to perform diagnostic test(s)
Lack of informed consent
Misdiagnosis

Ordering/performing unnecessary diagnostic tests/procedures

BIOMEDICAL

EQUIPMENT/PRODUCT RELATED

Malfunction
Misuse

TREATMENT RELATED

Abandonment of patient
Delay in treatment
Failure to make referrals appropriately
Failure to monitor patient
Failure to notify patient of test results
Failure to take adequate patient history
Failure to treat
Failure to use consultants appropriately
Improper choice of treatment
Improper treatment of fracture/dislocation
Inappropriate admissions(s)
Inappropriate discharge(s)/transfer(s)
Lack of informed consent

Anesthesia Related

General
Allergic/adverse reaction
Failure to test improper use of equipment
Improper intubation
Improper positioning of patient
Lack of informed consent
Teeth damage
Wrong amount/type of anesthesia prescribed

Intravenous Related

CVP line
Dye reaction
General
Infiltration
Lack of informed consent

Medication Related

Drug side effect
Drug toxicity/overdose
Failure to diagnose drug addiction
Failure to diagnose drug related problem(s) (not addiction)
Failure to prescribe
General
Lack of informed consent
Prescribing to a known addict
Wrong dose of medication ordered/administered
Wrong medication ordered/administered

Mental Illness Related

Failure to diagnose mental disorder/illness/problem
Failure to warn third party(ies)
General
Improper commitment
Improper use of seclusion/restraints
Lack of informed consent
Suicide/suicide attempt by inpatient
Suicide/suicide attempt by outpatient

Obstetrics-Gynecology Related

Failed sterilization
Failure to diagnose ectopic pregnancy
Failure to diagnose Pregnancy, normal
Fetal death/stillbirth
Gynecology-general
Improper performance of abortion
Injury to child during labor/delivery
Injury to mother during labor/delivery
Lack of informed consent
Maternal death related to delivery
Obstetrics-general
Wrongful life/birth

Surgery Related

Delay in surgery
General
Failure to diagnose post-op
complications
Improper treatment of post-op
complication
Improper/negligent performance

Laceration/penetration not within scope
of surgery
Lack of informed consent
Positioning-not anesthesia
Retained foreign bodies (e.g. needle,
sponge)
Unnecessary surgery
Wrong body part or wrong patient

Specified Procedures/Specialties

Angiography/arteriography
Biopsy
CAT scan/MRI
Catheterization
Chemotherapy
Circumcision
Colonoscopy
Endoscopy
Injection/Immunization
Laparoscopy/laparotomy
Myelography
Neonatology
Neurology
Orthopedics

Pediatrics
Plastic/cosmetic surgery
Radiation therapy
Stress test
Suturing

TRANSFUSION RELATED

Caused AIDS/HIV
Caused hepatitis
Mismatch

MISCELLANEOUS

Improper utilization review
Improper Workmen's Compensation
evaluation
Patient fall (in health care facility/office)
Performance of autopsy without
permission
Unauthorized DNR order
Vicarious liability for acts of another
provider
Violation of patient's civil rights
Wrongful death of patient

RESOURCES AND WEBSITES

American Medical Association	(800) 621-8335 www.ama-assn.org
Audio Digest.....	(800) 423-2308 www.audiodigest.com
Board of Registration in Medicine	(781) 876-8200
Licensing Division	(781) 876-8210
Physician Health Program	(781) 876-8259 www.mass.gov/massmedboard
Centers for Medicare & Medicaid Services (CMS)	1-(800) 465-3203 https://nppes.cms.hhs.gov/NPPES
Coverys Insurance	(800) 225-6168 www.coverys.com
CRICO	(877) 763-2742 (617) 495-5100 www.rmhf.harvard.edu
Department of Children & Families	(800) 792-5200 www.mass.gov/eohhs/gov/departments/dcf/
United States Drug Enforcement Administration (DEA)	(800) 882-9539 (617) 557-2200 www.deadiversion.usdoj.gov
Massachusetts Department of Public Health Drug Control Program	(617) 983-6700 www.mass.gov/dph/dcp
Massachusetts Medical Society.....	(781) 893-4610 (800) 322-2303 www.massmed.org
Medical Examiner's Office	(800) 962-7877 www.mass.gov/eopss/agencies/ocme/
Physician Health Services.....	(781) 434-7404 www.physicianhealth.org